

CLAIMS ONLY							Application Number 09/786759		Filing Date		
							Applicant(s)				
							* May be used for additional claims or amendments				
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT						
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	
1			1				51				
2				1			52				
3				1			53				
4				2			54				
5				2			55				
6				2			56				
7				1			57				
8				1			58				
9				1			59				
10				1			60				
11				1			61				
12				1			62				
13				1			63				
14				1			64				
15				1			65				
16				1			66				
17				1			67				
18				1			68				
19				1			69				
20				1			70				
21				1			71				
22				1			72				
23				1			73				
24				1			74				
25				1			75				
26				1			76				
27				1			77				
28				1			78				
29				2			79				
30			1				80				
31				1			81				
32				3			82				
33				3			83				
34				3			84				
35				3			85				
36				3			86				
37			1				87				
38			1				88				
39							89				
40							90				
41							91				
42							92				
43							93				
44							94				
45							95				
46							96				
47							97				
48							98				
49							99				
50							100				
Total Indep			4				Total Indep				
Total Depend			42				Total Depend				
Total Claims			46				Total Claims				

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